

STATEMENT OF AFFIRMATION ACTION TO SOLICIT DISADVANTAGED BUSINESS ENTERPRISE SUBCONTRACTORS

Contract Number _____ Project Number _____

Type of work to be sublet _____

Proposed Subcontractor _____

This Subcontractor (is) (is not) a Disadvantaged Business Enterprise.

STATEMENT OF AFFIRMATIVE ACTION

IMPORTANT! READ THE INSTRUCTIONS ON THE REVERSE SIDE OF THIS FORM

DBE CONTACTS:

AGENCIES CONTACTED:

WHY WAS A DBE CONTRACTOR NOT UTILIZED?

INDIANA DEPARTMENT OF TRANSPORTATION

REVIEWED BY DATE

COMPANY NAME

By _____
COMPANY OFFICER TITLE

COMPANY DBE OFFICER DATE
(Print or type)

REVISED INSTRUCTIONS FOR COMPLETING FORM DBE-2:

This form must accompany each "Request for Approval of Subcontractor", Form IC-730, on all Federal-Aid contracts let after January 1, 1976. It shall be prepared in duplicate, and the information should be typed for clarity.

1. Enter Contract and Project Numbers.
2. Indicate type of work being sublet. (Example: Seed, Sod, Hauling Borrow, Painting Structural Steel, etc.)
3. Enter name of proposed subcontractor as shown on Form IC-730.
4. Indicate whether or not the proposed subcontractor is a Disadvantaged Business Enterprise as defined in the contract provisions.
5. If the proposed subcontractor IS a DBE contractor, the "Statement of Affirmative Action" portion need not be completed.
6. If the proposed subcontractor is NOT a DBE contractor, the following documentation must be completed on the DBE-2:
 - a. **DBE CONTRACTS:** List the DBE contractors directly contracted by you. Include names, date of contracts, and method of contact (by letter, telephone, verbal, etc.) The minority contractor should be one who has expressed interest in doing the type of work you intend to sublet. The listing of Disadvantage Business Enterprises furnished by the Highway Department will be helpful in locating contractors in particular fields of work. If none are found in a particular field, then an agency contact will be required.

It is important that sufficient time be given when making contact with possible subcontractors so that they have enough time to prepare a quote if they are interested.
 - b. **AGENCIES CONTACTED:** List other agencies, organizations, or individuals directly contacted by you in an attempt to seek out DBE contractors for the proposed work. Include names, date of contacts, and method of contact. The agencies must be those who have knowledge of minority contractors working in the construction industry.
 - c. **WHY WAS A DBE CONTRACTOR NOT UTILIZED?** Explain your decision not to utilize a DBE contractor. Any reasons given must accurately reflect your efforts to locate and utilize minority contractors. Generalizations and statements not directly related to your documented efforts, will not be acceptable.
7. The form is to be signed and dated by an officer of the company.
8. Print or type the name of your company's DBE Officer.

THE INDIANA DEPARTMENT OF HIGHWAYS RESERVES THE RIGHT TO REQUEST COPIES OF LETTERS, CONFIRMATION OF TELEPHONE CALLS MADE, AND/OR ADDITIONAL DOCUMENTATION TO SUPPORT STATEMENTS MADE ON THE DBE-2. SPOT CHECKS MAY ALSO BE MADE DIRECTLY WITH THE MINORITY CONTRACTORS TO CONFIRM YOUR EFFORTS.